

BACKGROUND

Early HIV detection and preventive strategies such as pre-exposure prophylaxis (PrEP) are critical to reducing new HIV infections. Ambulatory care settings provide a unique opportunity to offer HIV point-of-care testing (POCT) and immediate linkage to prevention services for at-risk populations.

As of Aug 1, 2025, UMC ambulatory clinics have performed over 18,926 HIV POCTs. The latest initiative of UMC Wellness Center is focusing on is increasing uptake of HIV PrEP through nurse-driven initiatives in Ambulatory Care.

PURPOSE

This clinical project proposes the integration of rapid POCT with same-visit PrEP education and referral in ambulatory care. The goal is to improve HIV prevention efforts by increasing awareness and access to PrEP among patients who test HIV-negative.

METHODS

The proposed intervention involves offering HIV POCT to eligible patients during visit. Patients who receive a non-reactive result will be assessed for HIV risk factors and provided with brief, targeted counseling on PrEP on after visit summary (AVS). Those identified as appropriate candidates will be offered a referral to the Wellness Center, with nurse navigators coordinating follow-up, ensuring patients are linked to care and supported throughout the process.

SAY YES TO THE HIV TEST

TO SCHEDULE YOUR APPOINTMENT
CALL 702-207-TEST

THINK HIV

UMC



DID YOU KNOW?

In 2023, more than 2.4 million cases of chlamydia, gonorrhea and syphilis were reported in the United States.

In 2024, Clark County reported the following STI case totals:

- New HIV cases: 525 (up from 488)
- Chlamydia: 11,898 (down from 12,562 in 2023)
- Gonorrhea: 5,109 (down from 5,763)
- Primary and Secondary Syphilis: 368 (down from 554)

RESULTS

Expected outcomes from this project are

- Increased uptake of HIV POCT in ambulatory care
- Improved identification of PrEP-eligible patients
- Higher rates of PrEP referrals and initiation among HIV-negative individuals
- Enhanced patient education and engagement in HIV prevention
- Enhanced staff training and workflow integration for routine HIV risk screening
- Evaluation of implementation success through tracking testing rates, referral numbers, and patient engagement metrics over a 3-6 month pilot period.

CONCLUSIONS

This initiative demonstrates nursing innovation, evidence-based practice, and transformational leadership by embedding routine PrEP counseling into standard care. Through a patient-centered approach, it bridges the gap between HIV screening and prevention, strengthens early intervention, and promotes long-term outcomes. By aligning with national public health priorities, this model advances the goal of ending the HIV epidemic while exemplifying nursing's role in driving quality, safety, and equity. If successful, it offers a scalable framework replicable across outpatient settings, showcasing nursing excellence in health.

REFERENCES

See poster author for reference list

